



Testing Consent Form

To encourage parental involvement and ensure the safety and security of our potential members, we require parental consent for testing of children under the age of 18. Please complete the following information.

Name (Last, First, Middle)		Age
<input type="text"/>		<input type="text"/>
Parent/Guardian (Last, First, Middle)		Relation
<input type="text"/>		<input type="text"/>
Address (Street, Apt #)		Telephone #
<input type="text"/>		() -
City, State, Zip Code	Email Address	
<input type="text"/>	<input type="text"/>	

I hereby give American Mensa permission to administer the Mensa Admission Test to my child to determine eligibility for Mensa membership. I understand that a letter indicating membership qualification will be sent to the address listed above, and that upon qualification, this contact information will be provided to the local chapter. Additional verification may be confirmed prior to results being released.

<input type="text"/>	<input type="text"/>
Signature of Parent/Guardian listed above	Date

Proctor, please return this page with testing materials.